

$\int dx$  Law Office of Michael R. Nichols  
3001 S. Hardin Blvd., Ste. 110, PMB #155  
McKinney, TX 75070

## FAX COVER SHEET

|                    |                    |
|--------------------|--------------------|
| Date:              | May 16, 2005       |
| To:                | USPTO              |
| Fax:               | 703-305-8568       |
| Voice:             |                    |
| From:              | Michael R. Nichols |
| Fax:               | +1-469-519-0144    |
| Voice:             | +1-972-369-1300    |
| Docket/Serial No.: |                    |
| Subject:           |                    |
| Message:           |                    |

Attached please find:

1. Transmittal Form
2. Request for Refund of Publication Fee

RECEIVED  
USPTO-PG PUBS

MAY 16 2005

PROCESSED BY  
PG PUB DIVISION

MAY 18 2005

Number of pages transmitted, including cover page: 3

*Please contact us at +1-972-369-1300 if you do not receive all pages indicated above or experience any difficulty in receiving this facsimile*

This facsimile is intended only for the use of the addressee, and, if the addressee is a client or their agent, contains privileged and confidential information. If you are not the intended recipient of this facsimile, you have received this facsimile inadvertently and in error. Any review, dissemination, distribution, or copying is strictly prohibited. If you received this facsimile in error, please notify us by telephone and return the facsimile to us immediately.

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

|  |                   |
|--|-------------------|
| Application Number                       | 10/709,601        |
| Filing Date                              | May 17, 2004      |
| First Named Inventor                     | Clark             |
| Art Unit                                 | 3765              |
| Examiner Name                            | Izaguirre, Israel |
| Total Number of Pages in This Submission | 2                 |
| Attorney Docket Number                   | 8204-04-1         |

## ENCLOSURES (Check all that apply)

|   |   |   |
|---|---|---|
| <input type="checkbox"/> Fee Transmittal Form                             | <input type="checkbox"/> Drawing(s)                                       | <input type="checkbox"/> After Allowance Communication to TC                            |
| <input type="checkbox"/> Fee Attached                                     | <input type="checkbox"/> Licensing-related Papers                         | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences     |
| <input type="checkbox"/> Amendment/Reply                                  | <input type="checkbox"/> Petition   | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final                                      | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information  |
| <input type="checkbox"/> Affidavits/declaration(s)                        | <input type="checkbox"/> Power of Attorney, Revocation                    | <input type="checkbox"/> Status Letter  |
| <input type="checkbox"/> Extension of Time Request                        | <input type="checkbox"/> Change of Correspondence Address                 | <input type="checkbox"/> Other Enclosure(s) (please identify below):                    |
| <input type="checkbox"/> Express Abandonment Request                      | <input type="checkbox"/> Terminal Disclaimer                              |   |
| <input type="checkbox"/> Information Disclosure Statement                 | <input checked="" type="checkbox"/> Request for Refund                    |   |
| <input type="checkbox"/> Certified Copy of Priority Document(s)           | <input type="checkbox"/> CD, Number of CD(s) _____                        |   |
| <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application   | <input type="checkbox"/> Landscape Table on CD                            |   |
| <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Remarks  |   |

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|              |                                  |          |        |
|--------------|----------------------------------|----------|--------|
| Firm Name    | Law Office of Michael R. Nichols |          |        |
| Signature    | /Michael R. Nichols/             |          |        |
| Printed name | Michael R. Nichols               |          |        |
| Date         | May 16, 2005                     | Reg. No. | 46,959 |

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

|                       |                      |      |              |
|-----------------------|----------------------|------|--------------|
| Signature             | /Michael R. Nichols/ |      |              |
| Typed or printed name | Michael R. Nichols   | Date | May 16, 2005 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application: Clark et al.

§  
§  
§  
§  
§

Serial No.: 10/709,601

§ Group Art Unit: 3765

Filed: May 17, 2004

§ Examiner: Ismael Izaguirre

For: Quilting Frame Apparatus

§ Attorney Docket No.: 8204-04-1

§  
§REQUEST FOR REFUND OF PUBLICATION FEE

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

The above-styled application issued as Patent No. 6,839,992 on January 11, 2005 before having been printed under the Office's 18-month Pre-Grant Publication (PGPub) procedure. However, the Applicants paid the \$300 publication fee at the time of allowance. Applicants are therefore entitled to and hereby request a refund of this publication fee, as the application was never published under the PGPub procedure.

DATE: May 16, 2005

Respectfully submitted,

/Michael R. Nichols/

Michael R. Nichols  
Reg. No. 46,959  
Law Office of Michael R. Nichols  
3001 S. Hardin Blvd. Ste 110, PMB 155  
McKinney, TX 75070-7702  
Tel.: (972) 369-1300  
Fax: (469) 519-0144  
ATTORNEY FOR APPLICANTS

RECEIVED  
Refund Ref: USPTO-PG-PUBS4  
05/18/2005

MAY 16 2005  
Credit Card Refund Total: \$300.00

-300.00 OP

VISA....: XXXXXXXXXXXX2590